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**FEC** 

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

SECRETARY OF THE SENATE

FORM 3	For An Authorized Committee					1.	1 : rOffice Use Onlyou to 11.		
1. NAME OF COMMITTEE (in full)	TYPE OR PRI	R PRINT Example: If typing, type over the lines.			pe	12FE4M5			
umanda Curtis for S	enate								
DDRESS (number and stre	et) PO Box 731								
Check if different than previously reported. (ACC)  FEC IDENTIFICATION N	Butte CIT UMBER 3. IS REP		STATE  NEW O	 R □/	29703 ZIP COI AMENDED A)	DE	STATE	DISTRICT	
TYPE OF REPORT (C	hoose One)				•				
(a) Quarterly Reports:		(b) 12-Da	y PRE-Election	n Report f	for the:				
☐ April 15 Quarterly Report (Q1) ☐ July 15 Quarterly Report (Q2) ☐ October 15 Quarterly Report (Q3) ☐ January 31 Year-End Report (YE)		<u> </u>	ary (12P) vention (12C)		eneral (12G) pecial (12S)	□R	unoff (12R)		
		Electi	on on			in the State of		<u></u>	
☐Termination Report	(TER)		y POST-Election General (30 on on 1	•	Runoff (3	0R) in the State of	Special (30S	)	
Covering Period	10/16/2014	through	11	/24/20	14				
certify that I have examine	2.skt t	16/14 G.	y knowledge ar	ıd belief i	t is true, corre	ect and comple	ete.		
ASSISTATE Signature of Treasurer	<u></u>	hll	\ \_		Date	2/2/1	9		
IOTE: Submission of false	, erroneous, or inco	mplete informa	ation may subje	ct the pe	rson signing t	his Report to	the Penalties	of 2 U.S.C. 437g	
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